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PTO/SB/05 (4/98)

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Approved for use through 09/30/2000. OMB 0651-0030

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 2207/8754

First Inventor or Application Identifier Ronny RONEN et al

Express Mail Label No. Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

| | APPLICATION ELEMENTS apter 600 concerning utility patent application contents. | | Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231 | | | | | | |
|--------------|---|--------------------------------|---|--|--|--|--|--|--|
| | ee Transmittal Form (e.g., PTO/SB/17) | 5 | 5. Microfiche Computer Program (Appendix) | | | | | | |
| 2. X Sp | pecification [Total Pages 15 |] 6 | Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) | | | | | | |
| | Descriptive title of the Invention | | a. Computer Readable Copy | | | | | | |
| | Cross References to Related Applications Statement Regarding Fed sponsored R & D | | b. Paper Copy (identical to computer copy) | | | | | | |
| | Reference to Microfiche Appendix | | c. Statement verifying identity of above copies | | | | | | |
| - B | Background of the Invention | ACCOMPANYING APPLICATION PARTS | | | | | | | |
| 1 | Brief Summary of the Invention | 7 | Assignment Papers (cover sheet & document(s)) | | | | | | |
| | Brief Description of the Drawings (if filed) Detailed Description | . ا | 37 C.F.R.§3.73(b) Statement Power of | | | | | | |
| | Claim(s) | | (when there is an assignee) Attorney English Translation Document (if applicable) | | | | | | |
| | Abstract of the Disclosure | 9 | | | | | | | |
| 3. X Dra | awing(s) (35 U.S.C. 113) [Total Sheets 2 |] 10 | O. X Information Disclosure Statement (IDS)/PTO-1449 X Copies of IDS Citations | | | | | | |
| 4. Oath or [| Declaration [Total Pages | յ 11 | Preliminary Amendment | | | | | | |
| a. [| Newly executed (original or copy) | 12 | Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | | | | | | |
| b. [| Copy from a prior application (37 C.F.R. § 1 (for continuation/divisional with Box 16 completed) | ` '' | * Small Entity Statement filed in prior application | | | | | | |
| | DELETION OF INVENTOR(S) | 13 | Statement(s) Status still proper and desired | | | | | | |
| | Signed statement attached deleting | 114 | Certified Copy of Priority Document(s) | | | | | | |
| | inventor(s) named in the prior applica see 37 C.F.R. §§ 1.63(d)(2) and 1.33 | | other: | | | | | | |
| | ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL EN | 1117] | J. Culei. | | | | | | |
| | NLL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCL D IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.2 | | | | | | | | |
| 16. If a CO | NTINUING APPLICATION, check appropriate box, a | nd supply | the requisite information below and in a preliminary amendment: | | | | | | |
| c | ontinuation Divisional Continuation-in-p | art (CIP) | of prior application No:/ | | | | | | |
| | plication information: Examiner LIATION or DIVISIONAL APPS only: The entire disclose | ure of the | Group / Art Unit: prior application, from which an oath or declaration is supplied | | | | | | |
| under Box 4b | b, is considered a part of the disclosure of the accom | panying c | ontinuation or divisional application and is hereby incorporated by | | | | | | |
| reference. | 17. CORRESPO | | een Inadvertently omitted from the submitted application parts. | | | | | | |
| | 17. CONKESPO | TOLINOL | | | | | | | |
| ☐ Custom | ner Number or Bar Code Labe I (Insert Customer No. o. | Attach ba | or X Correspondence address below r code label here) | | | | | | |
| | 1 | | | | | | | | |
| Name | KENYON & KENYON | | | | | | | | |
| A alalac | Suite 700 | | | | | | | | |
| Address | 1500 K Street, NW | | | | | | | | |
| City | Washington State | DC | Zip Code 20005-1257 | | | | | | |
| Country | Telephone | (202 | 2) 220-4200 Fax (202) 220-4201 | | | | | | |
| Name (I | Print/Type) James M. Ross | | Registration No. (Attorney/Agent) 42,115 1 | | | | | | |

2000 Date Signature Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents,

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PTO/SB/17 (12/99)
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FEE TRANSMITTAI for FY 2000

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

(\$)744.00

| Complete if Known | | | | | |
|----------------------|-------------------|--|--|--|--|
| Application Number | | | | | |
| Filing Date | March 28, 2000 | | | | |
| First Named Inventor | Ronny RONEN et al | | | | |
| Examiner Name | Not assigned | | | | |
| Group / Art Unit | | | | | |
| Attorney Docket No. | 2207/8754 | | | | |

| METHOD OF PAYMENT (check one) | FEE CALCULATION (continued) | | | | | | | |
|---|--|--------|-------------------|----------|--|------------------|---------------------|----------|
| 1. X The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: | 3. ADDITIONAL FEES Large Entity Small Entity | | | | | | | |
| Deposit | Fee Cod | Fee | Fee | | e Fee | Description | า | Fee Paid |
| Account Number 11-0600 | 105 | 130 | 205 | 65 | Surcharge - late | filing fee or o | ath | 0.00 |
| Deposit | 127 | 50 | 227 | 25 | Surcharge - late cover sheet. | provisional fil | ing fee or | 0.00 |
| Account Name KENYON & KENYON | 139 | 130 | 139 | 130 | Non-English spe | cification | | 0.00 |
| Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17 | 147 | | | 2,52 | g For filing a requ | est for reexan | nination | 0.00 |
| | 112 | 920 | * 11: | 920 | Requesting puble Examiner action | | prior to | 0.00 |
| 2. Payment Enclosed: Check Money Other | 113 | 1,840 | * 11: | 3 1,84 | 10* Requesting publ Examiner action | ication of SIR | after | 0.00 |
| | 115 | 110 | 215 | 55 | Extension for rep | oly within first | month | 0.00 |
| FEE CALCULATION | 116 | 380 | 216 | 190 | Extension for rep | oly within seco | ond month | 0.00 |
| 1. BASIC FILING FEE | 117 | 870 | 217 | 435 | Extension for rep | oly within third | l month | 0.00 |
| Large Entity Small Entity Fee Fee Fee Fee Description | 118 | 1,360 | 218 | 680 | Extension for rep | ply within four | th month | 0.00 |
| Code (\$) Code (\$) Fee Paid | 128 | 1,850 | 228 | 925 | Extension for rep | oly within fifth | month | 0.00 |
| 101 690 201 345 Utility filing fee 690.00 | 119 | 300 | 219 | 150 | Notice of Appeal | | | 0.00 |
| 106 310 206 155 Design filing fee | 120 | 300 | 220 | 150 | Filing a brief in s | support of an a | appeal | 0.00 |
| 107 480 207 240 Plant filing fee 108 690 208 345 Reissue filing fee | 121 | 260 | 221 | 130 | Request for oral | hearing | | 0.00 |
| 114 150 214 75 Provisional filing fee | 138 | 1,510 | 138 | 1,510 | Petition to institut | te a public us | e proceeding | 0.00 |
| | 140 | 110 | 240 | 55 | Petition to revive | - unavoidabl | е | 0.00 |
| SUBTOTAL (1) (\$) 690.00 | 141 | 1,210 | 241 | 605 | Petition to revive | - unintention | al | 0.00 |
| 2. EXTRA CLAIM FEES | 142 | 1,210 | 242 | 605 | Utility issue fee (| or reissue) | | 0.00 |
| Fee from Ext <u>ra Claims below Fee Paid</u> | 143 | 430 | 243 | 215 | Design issue fee | : | | 0.00 |
| Total Claims 23 -20** = 3 x 18 = 54 | 144 | 580 | 244 | 290 | Plant issue fee | | | 0.00 |
| Independent 3 · 3** = 0 × 78 = 0 | 122 | 130 | 122 | 130 | Petitions to the (| Commissioner | | 0.00 |
| Multiple Dependent =0 | 123 | 50 | 123 | 50 | Petitions related | to provisional | l applications | 0.00 |
| **or number previously paid, if greater, For Reissues, see below | 126 | 240 | 126 | 240 | Submission of Ir | nformation Dis | sclosure Stmt | 0.00 |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description | 581 | 40 | 581 | 40 | Recording each | patent assign | ment per | 0.00 |
| Code (\$) Code (\$) | | 000 | 240 | 0.45 | property (times r | • | | 0.00 |
| 103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3 | 146 | 690 | 246 | 345 | Filing a submissi (37 CFR § 1.129 | | rejection | 0.00 |
| 104 260 204 130 Multiple dependent claim, if not paid | 149 | 690 | 249 | 345 | For each addition examined (37 CI | | | 0.00 |
| 109 78 209 39 ** Reissue independent claims over original patent | Other | fee (s | necify | . | · · · · · · · · · · · · · · · · · · · | | | 0.00 |
| 110 18 210 9 ** Reissue claims in excess of 20 | | · | | | | | | |
| and over original patent | Outer | fee (s | pecity | · | | | (0) (0) | 0.00 |
| SUBTOTAL (2) (\$) 54,00 | Red | uced b | y Basi | Filin | g Fee Paid | SUBTOTAL | (3) (\$) <u>O</u> . | 00 |
| SUBMITTED BY Complete (if applicable) | | | | | | | | |
| Name (Print/Type) James M. Ross | \triangle | | tration ey/Age | | 42,115 | Telephone | 220-420 | 0 |

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